

MISSOURI DEPARTMENT OF HEALTH STATE PUBLIC HEALTH LABORATORY

DATAMASTER MAINTENANCE REPORT

RECEIVED DHSS Breath Alcohol Program
By Carol Day at 8:14 am, Mar 12, 2010

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file. DATAMASTER SN DATE OF INSPECTION INVENTORY # 127279 204168 03-01-10 TIME OF INSPECTION LOCATION OF INSTRUMENT (STREET AND CITY) SALINE COUNTY JAIL MARSHALL, MO 1406 HOURS CHECKLIST: Place a check (<) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument, ☑ DIAGNOSTIC CHECK (PRINTOUT ATTACHED) □ COMPUTER □ DETECTOR □ PROGRAM ☑ FILTERS ☐ HEATERS SAMPLE CHAMBER _50 °C QUARTZ STANDARD ☐ CALIBRATION N PUMP HIGH SPEED PRINTER M INDICATOR LIGHTS ☐ TIME AND DATE 03-01-10 1406 HOURS SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 33, 9 °C · □ CALIBRATION CHECK -Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) ☑ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE O.040% STANDARD - MUST-READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) TEST 1 📂 1097 % TEST 2 # , 097% TEST 3 # 1098070 PERFORM R.F.I. TEST (PRINTOUT ATTACHED) oxtimes number of refusals, since last maintenance report, and number of breath tests in each range as (DO NOT INCLUDE SIMULATOR TESTS) FOLLOWS: (.15-.19) 2 (.10-.14) 3 (0-.04)(.05-.09)REFUSALS | (Over .19) List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary) INSTRUMENT OPERATING WITHIN D.O.H. STANDARDS GUTH LABORATORIES LOT # 09001 MFG, DATE 04-23-09 EXP. DATE 04-22-11 BOTTLE # 043 INSPECTING OFFICER TYPE II PERMIT NUMBERTEXPIRATION DATE CPL.C.K. SHANNON # 869
TELEPHONE NUMBER 816-622-0800

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 09001

EXPIRATION DATE: April 22, 2011 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number <u>09001</u> of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain <u>.1214</u> gms/dl +/-.003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of <u>.100</u> +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is <u>April 23, 2009.</u>
The expiration date for this lot number is <u>April 22, 2011</u> at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.

Cecil B. Garner, President

RepCo Marking, Inc.

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL BAC DATAMASTER SERIAL NUMBER 204168 03/01/10

- DIMONOSTIC CHECK ---

4.00

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEHTERU

SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED:

OKAY

2EXP

DETECTOR:

FILTERS:

94

QUARTZ STANDARD:

CHLIBRATION

OKAY

25.50

PRINTER TEST

!"#\$%%'()*+,-./0123456789:;<=>?@ABCDEFG HIJKLMNOPQRSTUVWXYZ[\]^_'abcdefghijklmno pqrstuvwxyz(|)}-

Operator Signature CR. C. Mars #787

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL BAC DATAMASTER SERIAL NUMBER 204168 03/01/10

ARREST TIME: 09:09 SUBJECT NAME:

TEST

DOB: 89/89/89 SEX: M

BRRESTING OFFICER:

ARROWTING OFFICER:

SECUE

OFFICER I.D.: 0869

TESTING OFFICER:

OFFICER I.D.: 0869

PERMIT NUMBER: 920032

EXPIRATION DATE: 02/18/11 MISCELLAMEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST
INTERNAL STANDARD

14:10

VERIFIED 14:10

Operator Signature_____(

2208-02

we CHC. S. Show

State of Missouri **DEPARTMENT OF HEALTH**



PERMIT TYPE II



Leb. 4 (R7-88)

CHRIS K SHANNON

| is hereby authorized to instruct and calibrate, perform field repairs, and op | d supervise operators, train instructors, inspect, erate the following breath analyzer(s): |
|---|---|
| DA | TAMASTER |
| air. Issued under the provisions of sect | ontent of blood from a sample of expired (alveolar) tions 577.020 through 577.041, RSMo 1986. John J. Wathuwson |
| Date 02/18/09 | V |
| Number 920032 | Director of State Public Health Laboratory |
| 02/18/2011 Expires | Margaret Ti Bruselly |
| NO 500 5774 (7 00) | - Director, Department of Health |
| MO 580-0771 (7-88) | leh & (D7-88) |